PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. VISIOH OF CORPORATIONS ԻՈւԵՄ DEPARTMENT OF STATE Katherine Harris Secretary of State 00 OCT 16 PH 5: 16 DIVISION OF CORPORATIONS F51928 DOCUMENT # 1. Corporation Name DANTZLER, INC. Principal Place of Business Mailing Address 7975 N.W. 154TH STREET, SUITE 240 7975 N.W. 154TH STREET. SUITE 240 MIAMI LAKES FL 33016 MIAMI LAKES FL 33016 If above addresses are incorrect in any way, line through incorrect information and enter correction below 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 10/30/1981 Suite, Apt. #, etc. Suite, Apt, #, etc. 5. FEI Number Applied For 59-0213620 City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Country Zip Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each City / State / Zip Title(s) and/or Directors Officer and/or Director 121 CAPE FLORIDA DRIVE KEY BISCAYNE FL GODINEZ, ANTONIO D. P -10/19/00--01079--022 S Miam\*\*\*\*\$502-8912 \*\*\*\*150.00 POTTER, VAUGHN L 9187 Fontainebleau Blvd, #3 COOPER CITY FL **BOISE WAY** VΡ NOBLE, MIKE SAN JUAN, PUERTO RICO 00936 AS FERNANDEZ, LUIS J PO BOX 362108, N/A T RIGUERO, ISIDORO 995 SW 84 Avenue, #315 Miami, FL 33144 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent FOTOPULOS, THOMAS E Street Address (P.O. Box Number is Not Acceptable) 707 N FRANKLIN ST STE 725 Suite, Apt. #, Etc. TAMPA FL 33802 State Zip Code City 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505. F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. October 11, 2000 Secretary (305) 828-9666 Ext. 130 Vaughn L. Potter, SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0021944

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October 11,-2000.

RE: Annual Report/Uniform Business Report

Florida Department of State P.O. Box 6327 Tallahassee, FL 32314-6327

Dear Sir:

Yesterday, we called you and spoke to Wendy, who told me to request an annual report form and submit it with the \$150.00 fee because we had never received any form or notification to file our annual report. Since we received your application for reinstatement in the mail, today, we are submitting that form, in lieu of the annual report form which has not arrived yet, with only the signature of the secretary, which is all that would be required on the annual report form.

Please receive our form with the \$150 fee as agreed.

Yours truly,

Dantzler Inc.

Vaughn L. Potter Enclosures/2/